

FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

Title of Invention	Method for Triggering an Action																							
Application Number :																								
Date :																								
First Named Applicant:		Mr. David R. Hall																						
Attorney Docket Number:		66.0068																						
TOTAL FEE AUTHORIZED \$ 1058																								
Patent fees are subject to annual revisions on or about October 1st of each year.																								
Filing as large entity																								
BASIC FILING FEE																								
<table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>1001</td><td>770</td><td>770</td></tr><tr><td colspan="4">Subtotal For Basic Filing Fees: \$ 770</td></tr></tbody></table>					Fee Description	Fee Code	Amount \$	Fee Paid \$	Utility Filing Fee	1001	770	770	Subtotal For Basic Filing Fees: \$ 770											
Fee Description	Fee Code	Amount \$	Fee Paid \$																					
Utility Filing Fee	1001	770	770																					
Subtotal For Basic Filing Fees: \$ 770																								
EXTRA CLAIM FEES																								
<table border="1"><thead><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims : 36</td><td>16</td><td>1202</td><td>18</td><td>288</td></tr><tr><td>Independent Claims : 2</td><td>0</td><td>1201</td><td>86</td><td>0</td></tr><tr><td colspan="5">Subtotal For Extra Claims Fees: \$ 288</td></tr></tbody></table>					Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$	Total Claims : 36	16	1202	18	288	Independent Claims : 2	0	1201	86	0	Subtotal For Extra Claims Fees: \$ 288				
Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$																				
Total Claims : 36	16	1202	18	288																				
Independent Claims : 2	0	1201	86	0																				
Subtotal For Extra Claims Fees: \$ 288																								
AUTHORIZED BILLING INFORMATION																								
The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:																								
Deposit account number:		180584																						
Access Code		****																						
Deposit name:		Reed Tool Co.																						
Deposit authorized name:		Jeffery E. Daly																						
Signature:		Jeffery E. Daly																						
Date (YYYYMMDD):		2004-08-10																						
Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.																								